PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998  OP 443842											42		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMA		ENTITY	OR	OTHER		
FOR			NUMBER FILED			NUMBER EXTRA		RAT	E	FEE	1	RATE	FEE
BASIC FEE										380.00	OR		760.00
TOTAL CLAIMS			36 minus 20=			= 16			=	144	OR	X\$18=	
INDEPENDENT CLAIMS			// minus 3 =			= ' /		X39	_	39	OR	X78≃	
MULTIPLE DEPENDENT CLAIM PRESENT						+130	<b>`</b> -	× /	1	+260=			
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA		563	OR	TOTAL		
CLAIMS AS AMENDED - PART II								1017	<b>`-</b>	$\varphi$	Jon	OTHER	THAN
		(Colun	nn 1)			Column 2)	(Column 3)	SMA	LLI	ENTITY	ÖR	SMALL	
<b>AMENDMENT A</b>		CLAI REMAI AFTI AMEND	NING ER		Р	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ш	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 64		Minus	**	36_	=30	X\$ 9	=	210	OR	X\$18=	
	Independent	.5	· · · ·	Minus	**		= / .	X39	=	80	OR	X78=	
_	FIRST PRESE	NTATION	OF MU	JLTIPLE DE	PEN	DENT CLAIM		+130	=	7-	OR	+260=	
								L 47	TAL	-	1 .	TOTAL	
											IOR		
		(Colun	nn 1)		(6	Column 2)	(Column 3)	ADDIT. F			JOR	ADDIT. FEE	
ENTB		(Colum CLAI REMAI AFTI AMEND	MS NING ER			Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		EE	ADDI- TIONAL FEE	OR		ADDI- TIONAL FEE
	Total	CLAI REMAI AFTI AMEND	MS NING ER	Minus		HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT	ADDIT. F	E	TIONAL	OR	ADDIT. FEE	TIONAL
	Independent	CLAI REMAI AFTI AMEND	MS NING ER MENT	Minus	##	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. F	E =	TIONAL		ADDIT. FEE	TIONAL
AMENDMENT B		CLAI REMAI AFTI AMEND	MS NING ER MENT	Minus	##	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	PATI	E =	TIONAL	OR	RATE X\$18=	TIONAL
	Independent	CLAI REMAI AFTI AMEND	MS NING ER MENT	Minus	##	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	X\$ 9  X39: +130	E =	TIONAL	OR OR OR	RATE  X\$18=  X78=	TIONAL FEE
	Independent FIRST PRESE	CLAI REMAI AFTI AMEND * 3	MS NING ER MENT  O  O  O  O  O  O  O  O  O  O  O  O  O	Minus	P **	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	X\$ 9  X39: +130	E =	TIONAL FEE	OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL	TIONAL FEE
C AMENDMENT	Independent FIRST PRESE	CLAI REMAI AFTI AMEND * 3	MS NING ER MENT  O  I OF MI  ON 1)  MS NING ER	Minus	PEN	HIGHEST NUMBER REVIOUSLY PAID FOR 66	PRESENT EXTRA	X\$ 9  X39: +130	E = TAL	TIONAL FEE	OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL	TIONAL FEE
C AMENDMENT	Independent FIRST PRESE	CLAI REMAI AFTI AMEND * 3 * * ** * * * * * * * * * * * * * *	MS NING ER MENT  O  I OF MI  ON 1)  MS NING ER	Minus	PEN	HIGHEST NUMBER REVIOUSLY PAID FOR  Column 2) HIGHEST NUMBER REVIOUSLY	PRESENT EXTRA	ADDIT. F	E = AL	ADDI- TIONAL	OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE	ADDI- TIONAL
C AMENDMENT	Independent FIRST PRESE  Total Independent	CLAI REMAI AFTI AMEND * COlun CLAI REMAI AFTI AMEND	MS NING ER MENT  O  I OF MI  ON 1) MS NING ER MENT	Minus JLTIPLE DE	PPENI	HIGHEST NUMBER REVIOUSLY PAID FOR  Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA  COlumn 3) PRESENT EXTRA	ADDIT. F  RATI	E = TAL	ADDI- TIONAL	OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE	ADDI- TIONAL
AMENDMENT	Independent FIRST PRESE	CLAI REMAI AFTI AMEND * COlun CLAI REMAI AFTI AMEND	MS NING ER MENT  O  I OF MI  ON 1) MS NING ER MENT	Minus JLTIPLE DE	PPENI	HIGHEST NUMBER REVIOUSLY PAID FOR  Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA  COlumn 3) PRESENT EXTRA	ADDIT. F  RATE  X\$ 9  X39  +130  ADDIT. F  RATE  X\$ 9  X39  X39	E = ALEE	ADDI- TIONAL	OR OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE  RATE  X\$18=  X78=	ADDI- TIONAL
- AMENDMENT C AMENDMENT	Independent FIRST PRESE  Total Independent FIRST PRESE	CLAI REMAI AFTI AMEND  * 3  * COlum CLAI REMAI AFTI AMEND  * NTATION	MS NING ER MENT  OF MI  OF MI  OF MI  OF MI  S than th	Minus  JLTIPLE DE  Minus  Minus  JLTIPLE DE	PENI	HIGHEST NUMBER REVIOUSLY PAID FOR  Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR  DENT CLAIM	PRESENT EXTRA  (Column 3)  PRESENT EXTRA	# ADDIT. F  RATE  X\$ 9  X39  +130  ADDIT. F  X\$ 9  X39  +130	E E E E E E E E E E E E E E E E E E E	ADDI- TIONAL	OR OR OR OR OR	ADDIT. FEE  RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE  RATE  X\$18=  X78=  +260=	ADDI- TIONAL
AMENDMENT C AMENDMENT	Independent FIRST PRESE  Total Independent FIRST PRESE  Independent FIRST PRESE  Independent FIRST PRESE  Independent Fire "Highest Num	CLAI REMAI AFTI AMEND  * COlum CLAI REMAI AFTI AMEND  * NTATION  * * * * * * * * * * * * * * * * * *	MS NING ER MENT  O  I OF MI  MS NING ER MENT  OUSly Palously Palou	Minus  JLTIPLE DE  Minus  Minus  JLTIPLE DE  de entry in col did For' IN TH	PPENI  PP	HIGHEST NUMBER REVIOUSLY PAID FOR  Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR  DENT CLAIM	PRESENT EXTRA  (Column 3)  PRESENT EXTRA  =	# ADDIT. F  RATE  X\$ 9  X39  +130  ADDIT. F  X39  +130  ADDIT. F	E = IAL EE	ADDI- TIONAL FEE	OR OR OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE	ADDI- TIONAL

**Application or Docket Number**